For Additional Information on DNR Orders Contact your physician or:

Information Provided by AHS Bioethics Committee

Atlantic Health System Overlook Hospital

Do Not Resuscitate (DNR) Orders

Guidelines for Patients, Families & Caregivers

Background:

Cardiopulmonary resuscitation (CPR) is the expected response to cardiac arrest. Although CPR may be effective in healthy persons, it is often unsuccessful for the very sick and many patients do not survive. Others may live for only a short period of time in an intensive care unit before succumbing to their ultimate death.

Patients in New Jersey and across the nation have the legal right to refuse such medical treatments as CPR. In order to exercise this right, a physician's order for DNR must be written to stop the automatic response of CPR. Many patients have such DNR orders written by their physicians because CPR is considered a futile and unwanted intervention that may prolong the dying process.

DNR orders may be implemented in a variety of settings as described in this brochure.

DNR Orders in the hospital:

The patient's physician can write a DNR order based upon the patient's request, as expressed verbally or in an Advance Directive, or based upon the medical condition of the patient and the futility of CPR. Consent for DNR orders is given by the patient and/or surrogate decision maker and the order is clearly documented on the patient's chart to prevent unwanted CPR at the time of de ath.

DNR Orders in the Operating Room:

Patients who have DNR orders in place during their hospital stay and are going to undergo a surgical procedure have the option of temporarily "lifting" the DNR order during the surgical procedure or maintaining the DNR order during the surgery. In either event, the DNR order must be discussed with the surgeon and the patient's physician prior to the surgery and re-written for the surgical procedure and again after the surgery.

DNR Orders outside of the hospital:

There is a mechanism in place in NJ to allow physicians to write DNR orders for patients who are at home and choose to forego CPR at the end of life. This allows these patients and their families to call "9-1-1" for any medical emergency without the fear of unwanted CPR. A specially designed Out-of-Hospital DNR form is available from your hospital or physician and an optional DNR bracelet. The form should be prominently displayed at home or immediately available to show EMS personnel who may arrive to treat the patient.

Commonly asked questions about DNR Orders:

- Q: If I have a DNR order, does this mean I will not receive other treatments?
- A: NO. <u>DNR does not mean do not treat.</u> All appropriate treatments according to the plan of care for the patient will be administered. DNR orders only mean that no resuscitation attempts will be made at the time of death. Other treatments will be decided upon with your

physician according to medical necessity and your wishes.

- Q: If I request no CPR in my Living Will, will this stop unwanted CPR?
- A: NO. A Living Will (or Advance Directive) does not become operative in an emergency setting such as when someone's heart stops. There is insufficient time and knowledge about the patient's wishes, prognosis and clinical condition to waste valuable time trying to determine if CPR is called for at the time. Therefore, a physician must sign a DNR order for the patient in order to implement those wishes. ONLY a DNR order will stop CPR attempts in all settings.
- Q: Will EMS personnel honor a DNR order outside of the hospital?
- A: YES. EMS personnel have been trained to honor a valid DNR order. In order to protect your wishes, make sure that you have your physician sign and date the specially designed NJ Out of Hospital DNR form. You should keep photocopies of the DNR order available in your home and any other setting in which you may travel.